## ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
| FEE DETERMINATION | AS | | 03/21/00 |
| O.I.P.E. CLASSIFIER | | 8 | 3-23-00 |
| FORMALITY REVIEW | | 69055 | 5-9-00 |
| RESPONSE FORMALITY REVIEW | Sch | 47718 | 7/6/w |

## INDEX OF CLAIMS

| | |
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| ✓ ........ Rejected | N ........ Non-elected |
| = (Through numeral) .... Allowed | I ........ Interference |
| - ........ Canceled | A ........ Appeal |
| ÷ ........ Restricted | O ........ Objected |

| Claim | | Date | | | | | | | | | Claim | | Date | | | | | | | | | Claim | | Date | | | | | | | | |
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| Final | Original | | | | | | | | | | Final | Original | | | | | | | | | | Final | Original | | | | | | | | | |
| | 1 | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | 51 | | | | | | | | | | | 101 | | | | | | | | | |
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| | 3 | | ✓ | ✓ | ✓ | | | | | | | 53 | | | | | | | | | | | 103 | | | | | | | | | |
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| | 9 | | | | ✓ | ✓ | | | | | | 59 | | | | | | | | | | | 109 | | | | | | | | | |
| | 10 | | | | ✓ | ✓ | | | | | | 60 | | | | | | | | | | | 110 | | | | | | | | | |
| | 11 | | | ✓ | | | | | | | | 61 | | | | | | | | | | | 111 | | | | | | | | | |
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| | 13 | ✓ | ✓ | ✓ | ✓ | ✓ | | | | | | 63 | | | | | | | | | | | 113 | | | | | | | | | |
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| | 22 | N | N | | | | | | | | | 72 | | | | | | | | | | | 122 | | | | | | | | | |
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If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)